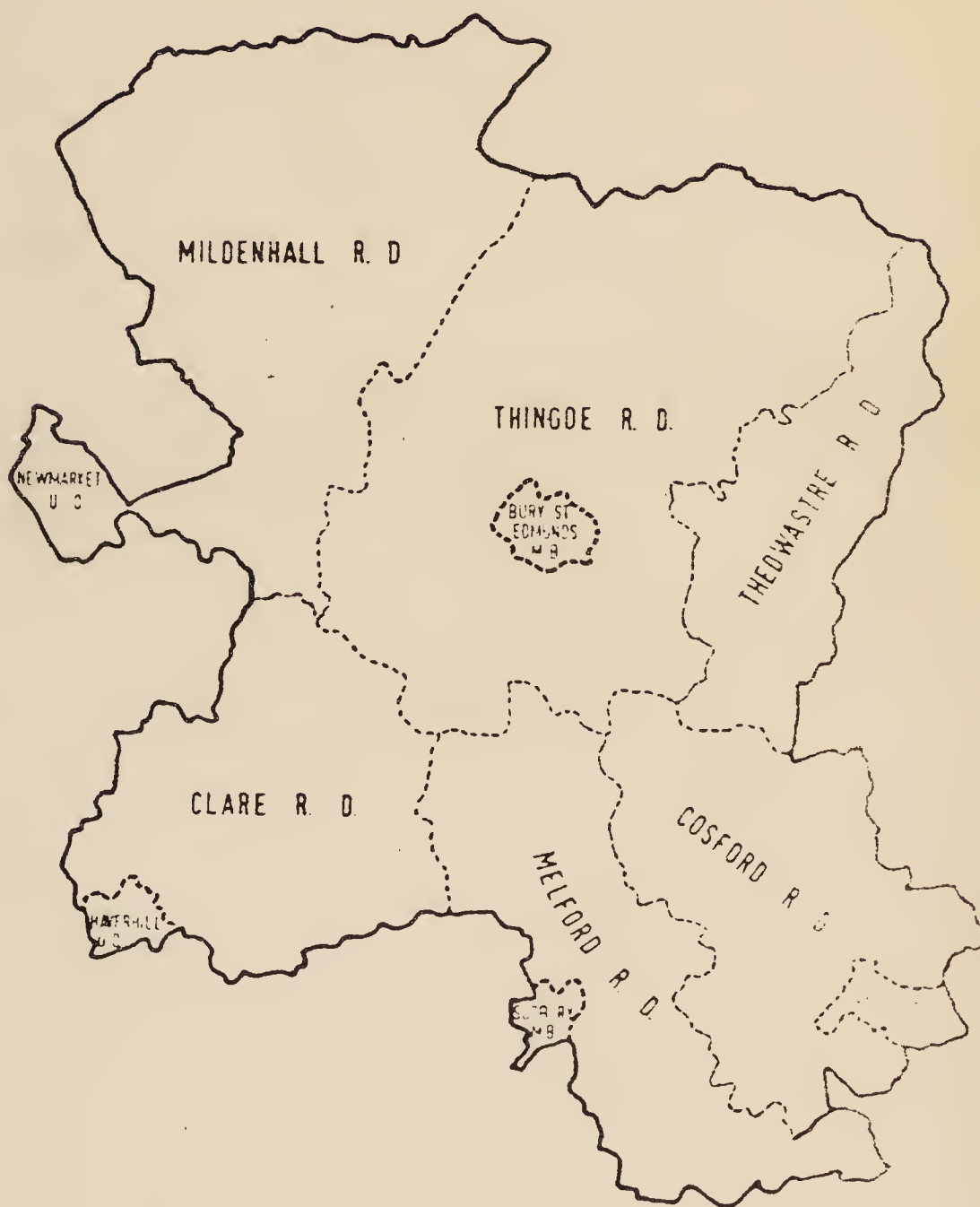




WEST SUFFOLK



ANNUAL REPORTS OF
THE COUNTY MEDICAL
OFFICER OF HEALTH
AND THE PRINCIPAL
SCHOOL MEDICAL
OFFICER
FOR THE YEAR 1972



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St. Edmund's House,
Bury St. Edmunds.

Tel. Bury St. Edmunds 63141

28th August, 1973

To the Chairman and Members of the West Suffolk County Council,

I have the honour to present my annual report for 1972, with which is incorporated the report of the School Health Service. For the first six months of the year the department was the responsibility of my predecessor, Dr. D. A. McCracken. Dr. McCracken served the county as its Medical Officer of Health for twenty years and amongst his many interests he devoted special care to elderly and handicapped people. I should like here to record my personal debt to Dr. McCracken for the help he gave me when I succeeded him.

The year's work has been greatly affected by preparation for re-organisation of the National Health Service in 1974 which has laid considerable extra burdens of work on the staff. With the publication of the White Paper, the Bill, the Hunter Report on Medical Administrators and the Report on Management Arrangements much of the future pattern was disclosed. All the present Health Administrations will cease to exist and will be replaced by a two-tier system of Regional and Area Health Authorities, responsible for all aspects of health care including the provision of medical advice to the new local authorities. Although much has been achieved under the present tripartite structure of the National Health Service by sensible co-operation between the bodies responsible for the different aspects of health care, and in West Suffolk itself a large measure of de facto integration has been reached, the new arrangements offer the opportunity of complete co-ordination of all health services.

An account is given elsewhere in this report of the department's involvement at the resettlement centre for Ugandan Asians at Stradishall. I should like here to thank most sincerely all those who assisted with the medical arrangements at the centre, whether they were members of voluntary organisations, individual volunteers, members of other Health Service bodies, or of the County Health Department itself. The refugees were treated with sympathy and cheerfulness at all times despite the fact that many of those dealing with them had frequently to work around the clock.

The normal work of the department has continued and is recorded in this report. As it is likely to be the last of the present series the opportunity has been taken of making it as full as possible a record of current provision. I would like to draw particular attention to the progress of the health centre programme, to the large and welcome increase in the numbers of women attending family planning clinics and to the inauguration of a domiciliary family planning service. Although the number of patients referred to the last service was small, this has been a common finding in other parts of the country and this very necessary service can take several years to become fully established. In contrast to these indications of progress I regret to report that no advance has been made towards fluoridation of the water supply.

In conclusion I should like to express my gratitude to the chairman and members of the Health Committee for their support and encouragement and to the staff of the department for the high standard of their work.

D. G. H. PATEY

County Medical Officer of Health.

PART I

GENERAL AND STATISTICAL

As requested by the Department of Health and Social Security certain vital statistics relating to mothers and infants are given below. The statistics for 1971 are also given for comparative purposes.

	1972	1971
<i>Live Births.</i>		
Number	2,865	2,981
Rate (a 1000 population)	15.8	17.7
<i>Illegitimate Live Births (percent of total live births)</i>	4.8	5.0
<i>Stillbirths.</i>		
Number	28	30
Rate (a 1000 total live and still births) ..	10	10
<i>Infant Deaths (under 1 year)</i>	49	62
<i>Infant Mortality Rates</i>		
Total Infant deaths (a 1000 total live births) ..	17	21
Legitimate Infant deaths (a 1000 legitimate live births)	16	21
Illegitimate Infant deaths (a 1000 illegitimate live births)	35	14
<i>Neonatal Mortality Rate</i>		
(Deaths under 4 weeks a 1000 live births) ..	13	14
<i>Early Neonatal Mortality Rate</i>		
(Deaths under 1 week a 1000 live births) ..	10	12
<i>Perinatal Mortality Rate</i>		
(Stillbirths and deaths under 1 week combined a 1000 live births)	20	22
<i>Maternal Mortality (including abortion)</i>		
Number of Deaths	—	—
Rate (a 1000 total live and stillbirths) ..	—	—

VITAL STATISTICS WEST SUFFOLK COMPARED WITH ENGLAND AND WALES

YEAR	POPULA- TION (MID- YEAR ESTIMATE)	LIVE BIRTHS		DEATHS		INFANT MORTALITY		NEONATAL MORTALITY		STILLBIRTHS		MATERNAL MORTALITY	
		No.	West Suffolk	No.	West Suffolk	No.	West Suffolk	No.	West Suffolk	No.	West Suffolk	No.	West Suffolk
		Rate a 1,000 Population	England & Wales	Rate a 1,000 Live Births	England & Wales	Rate a 1,000 Population	England & Wales	Rate a 1,000 Population	England & Wales	Rate a 1,000 Population	England & Wales	Rate a 1,000 Population	England & Wales
1941	114,630	14.6	14.9	1,569	13.7	32.9	60.0	†	†	†	†	6	3.2
1951	124,200	15.1	15.5	1,595	12.8	28.3	29.6	†	†	†	†	2	1.17
1961	134,200	16.2	17.5	1,515	10.5	18.4	21.4	30	13.8	41	18.5	1	0.45
1968	159,430	18.5	16.9	1,704	10.7	17.8	18.3	42	14.4	41	13.8	—	—
1969	163,760	18.6	16.3	1,702	10.3	16.0	18.0	35	12.0	41	13.0	1	—
1970	166,830	18.0	16.0	1,756	10.4	17.4	18.2	44	15.0	24	8.0	—	—
1971	168,740	17.7	16.0	1,794	10.5	20.8	18.0	43	14.0	30	10.0	—	—
1972	173,430	15.8	14.7	1,788	10.2	17.1	17.3	37	13.0	28	10.0	—	—

† Not Available

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE

Registrar General's Code	CAUSES OF DEATH	Total all ages		Under 4 weeks		4 weeks and under 1 year		AGE IN YEARS											
								1	5	15	25	35	45	55	65	75 and over			
								M	M	F	M	F	M	F	M	F	M	F	M
								F	F	M	F	M	F	M	F	M	F	M	F
B.1	Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.2	Typhoid Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.3	Bacillary dysentery and amoebiasis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.4	Enteritis and other diarrhoeal diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.5	Tuberculosis and respiratory system	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.6(1)	Other tuberculosis, including late effects	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.6(2)	Other tuberculosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.7	Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.8	Diphtheria	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.9	Whooping Cough	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.10	Streptococcal sore throat and scarlet fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.11	Meningococcal infection	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.12	Acute Poliomyelitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.13	Smallpox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.14	Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.15	Typhus and other rickettsioses	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.16	Malaria	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.17	Syphilis and its sequelae	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.18	All other infective and parasitic diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(pt.)	Malignant neoplasm - Buccal cavity & pharynx	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(pt.)	Malignant neoplasm - oesophagus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(pt.)	Malignant neoplasm - stomach	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(pt.)	Malignant neoplasm - intestine	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(pt.)	Malignant neoplasm - larynx	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(6)	Malignant neoplasm - lung, bronchus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(7)	Malignant neoplasm - breast	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(8)	Malignant neoplasm - uterus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(9)	Malignant neoplasm - prostate	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(10)	Leukaemia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.19(11)	Other malignant neoplasms	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.20	Benign neoplasms and neoplasms of unspecified nature	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.21	Diabetes mellitus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.22	Avitaminoses and other nutritional deficiency diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
B.46(1)	Other endocrine, nutritional and metabolic diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

MAIN VITAL STATISTICS FOR EACH COUNTY DISTRICT

DISTRICT	ESTIMATED POPULATION (mid 1972)	BIRTH RATES		DEATH RATES	
		Crude	Adjusted	Crude	Adjusted
<i>Borough and Urban Districts</i>					
Bury St. Edmunds ..	26,420	14.4	13.7	11.6	9.6
Hadleigh ..	5,220	15.1	14.2	10.7	9.7
Haverhill ..	13,010	24.3	20.4	8.9	13.2
Newmarket ..	13,170	15.8	15.0	11.7	11.2
Sudbury ..	8,530	14.3	14.7	18.4	11.0
TOTALS ..	66,350	16.7	15.5	11.9	10.7
<i>Rural Districts</i>					
Clare ..	10,160	16.0	17.6	12.8	11.0
Cosford ..	10,290	14.7	16.9	12.5	10.0
Melford ..	20,470	16.9	15.9	10.1	10.4
Mildenhall ..	30,590	18.9	17.0	6.5	9.2
Thedwastre ..	10,520	12.7	14.7	12.5	10.9
Thingoe ..	25,050	15.4	14.9	8.1	9.3
TOTALS ..	107,080	16.4	16.2	9.3	9.9
GRAND TOTALS ..	173,430	16.5	15.8	10.3	10.2

PART II

EPIDEMIOLOGY

Notifiable Diseases.

The following final notifications have been received from the District Medical Officers of Health:—

NOTIFIABLE DISEASE	COUNTY DISTRICT												
	BURY ST. EDMUNDS	HADLEIGH U.D.	HAVERHILL U.D.	NEWMARKET U.D.	SUDBURY M.B.	CLARE R.D.	COSFORD R.D.	MELFORD R.D.	MILDENHALL R.D.	THEDWASTRE R.D.	THINGOE R.D.	TOTAL 1972	1971
Scarlet Fever	5	3	—	2	13	8	2	8	—	—	3	44	36
Whooping Cough	3	—	—	—	1	—	—	2	—	3	7	16	64
Ac. Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	12	1	2	8	2	37	5	6	106	14	44	237	865
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery — Bacillary ..	1	—	—	—	—	—	—	—	—	—	—	1	9
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid and Paratyphoid Fevers	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	1	3	—	—	—	—	—	1	5	16
Ophthalmia Neonatorum ..	—	—	—	—	—	—	—	—	—	—	—	—	—
Infective Hepatitis	4	—	1	1	2	—	6	2	1	—	7	24	9
Malaria	—	—	—	—	—	—	—	2	2	—	—	4	—
T. B. Respiratory	4	—	1	2	—	2	2	1	1	1	—	14	7
T. B. Other	—	—	—	—	—	—	—	—	—	—	—	—	4
Tetanus	—	—	—	—	—	—	1	—	—	—	—	1	3
Acute Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL	30	4	4	14	21	47	16	21	110	18	62	347	1014

Sexually Transmitted Diseases.

New cases notified (comparable figures for 1971 are not available).

							1972
Syphilis	..	..	..	..	..	..	—
Gonorrhoea		..	..	..	..	..	70
Other genital infections			..	..	..	..	255
Other conditions	..	..	..	..	..	..	<u>161</u>
						TOTAL ..	<u>486</u>

Contacts of patients are followed up by the Liaison Health Visitor attached to the Hospitals for this speciality.

Vaccination.

The number of persons under 16 years of age vaccinated was as follows — the figures for the previous year being shown in brackets:—

			By County Staff		By General Practitioners	
Smallpox						
Vaccination	..	..	—	(—)	236	(1,260)
Re-vaccination	..	..	—	(—)	176	(230)
Poliomyelitis						
basic course (1st year)	..		757	(686)	1,707	(1,767)
re-inforcing dose (school entry)			250	(386)	1,315	(1,733)
Whooping Cough						
basic course (1st year)	..		755	(674)	1,686	(1,772)
Diphtheria						
basic course (1st year)	..		761	(685)	1,709	(1,795)
re-inforcing dose (school entry)			264	(385)	1,283	(1,404)
Tetanus						
basic course (1st year)	..		761	(685)	1,774	(1,922)
re-inforcing doce (school entry)			264	(385)	1,677	(1,999)
Measles	..	..	715	(470)	1,631	(1,617)

	Pre-Computer Scheme		Computer Scheme	
	% of children born in preceding calendar year who were vaccinated by end of year stated			
	1968	1969	1970	1971
Diphtheria				
England and Wales	83	67	81	80
West Suffolk ..	76	56	75	73
Whooping Cough				
England and Wales	81	66	79	78
West Suffolk ..	75	56	75	73
Poliomyelitis				
England and Wales	80	65	79	80
West Suffolk ..	78	55	74	72
Tetanus				
England and Wales	83	67	81	80
West Suffolk ..	76	56	75	73

Computer Scheme.

Since 1st January, 1970 programming of appointments for vaccination and immunisation have been carried out on the County Council's computer.

During the previous year there was close consultation between the West Suffolk Executive Council and Local Medical Committees and the department and I am pleased to say that the scheme has been accepted by the vast majority of doctors in the County.

Apart from ensuring that all children given consents are immunised at the correct time, the system allows parents the choice of either having their child immunised by their own doctor or at the local health clinic. With regard to appointment arrangements, doctors have the choice of either letting the computer make appointments on their behalf or arranging appointments themselves or alternatively doctors sometimes prefer parents to make their own appointments.

Other main features of the scheme include the provision, at the end of every month, of a list of children whose consents have not been returned to the Department. This enables health visitors to complete a full return of consents for their own areas. The computer also provides birth statistics at the end of every quarter and also at the end of the year. The vaccination results statistics of school population forecasting figures are also provided for the Education Department every September.

PART III

CARE OF MOTHERS AND YOUNG CHILDREN

Child Health Clinics.

With the opening of Mildenhall Health Clinic in September 1972, the number of purpose built clinics rose to five. Apart from these premises, child health clinics were also held in 25 rented premises. Two other clinics are held in premises lent for the purpose by the Royal Air Force, making provision for service families posted to the area.

The total number of children attending the clinics shows a rise of 877 compared with 1971 and the total number of attendances also rose by 1,711.

The total number of children of various ages who attended the clinics in 1972 and 1971 are given below.

	1972		1971
Born in 1972	2,122	Born in 1971	1,937
" " 1971	2,445	" " 1970	1,912
" " 1967-70	<u>2,161</u>	" " 1966-69	<u>2,002</u>
TOTAL	<u>6,728</u>	TOTAL	<u>5,851</u>
Total Attendance	36,056	Total Attendance	34,345

The number of clinics held by Medical Officers increased from 451 in 1971 to 499 in 1972 and those held by Health Visitors decreased from 1,028 to 797, an adjustment to the changing need.

Following the establishment of the developmental clinic at Sudbury at the end of 1971, a second developmental clinic was started at Great Cornard in February and is held twice monthly.

Welfare Milk Scheme.

The main centres at Bury St. Edmunds, Newmarket, Haverhill and Sudbury continue to function. The new health clinic at Mildenhall took over the distribution of foods from the voluntary centre there in September. At 31st December there were 10 voluntary distribution centres compared with 43 for the previous year.

The following issues were made:—

CENTRES	COMMODITY					
	NDM Pkts.	CLO Bottles	Vit. A. D. Tabs. Pkts.	O.J. Bottles	Vit. A.D.&C. Drops. Bots.	Vit. A.D.&C. Tabs. Drums
Bury St. Edmunds ..	1,988	37	392	5,496	3,803	362
Newmarket ..	654	—	166	1,499	1,327	233
Haverhill ..	2,506	—	247	2,622	1,291	372
Sudbury ..	519	—	83	2,626	2,104	100
Mildenhall ..	88	—	—	—	689	13
TOTAL ..	5,755	37	888	12,243	9,214	1,080
Vol. Centres ..	2,263	66	176	4,225	530	16
TOTAL ISSUES ..	8,018	103	1,064	16,468	9,744	1,096

I would like to express my appreciation of the work done by the voluntary distributors. Many of the voluntary centres closed down during the year as the withdrawal of orange juice had meant that their sales had fallen off considerably.

Other Welfare Foods.

These foods, vitamin preparations and pharmaceutical products are available to mothers and young children through the child health clinics and health visitors. The following issues were made:—

	1972	1971
Vitamin Preparations:—		
Vitamin C	10,318 bottles	11,546 bottles
Vitamin A & D (liquid)	77 bottles	2,401 bottles
Vitamin B (solid)	9,813 tins	9,643 tins
Pharmaceutical Products:—		
Lactagol Tablets for Nursing Mothers	78 boxes	95 boxes

In addition to these commodities, tooth brushes for children were available and 4,741 (4,383) were issued.

Cash receipts for all the above items amounted to £2,036 (£2,272).

Congenital Malformations.

Congenital malformations were notified in 62 babies, of which 5 were stillborn. In all 89 different malformations were represented.

Phenylketonuria.

All babies are tested for phenylketonuria. No infant was found to have this condition, but one baby was found to have histidinaemia. Although no special treatment is required the child remains under observation.

Family Planning.

Clinics.

Clinic services in the county are provided by the Family Planning Association acting as agents of the County Council. Advice is free to all patients and contraceptive supplies free to patients who have medical grounds for avoiding pregnancy. The only charges paid are by patients who do not have these medical grounds who pay for their supplies. The table below shows the numbers attending the clinics for both 1971 and 1972, and it will be seen that the total number of women attending rose by 49%.

CLINIC	NEW CASES		TOTAL PATIENTS		TOTAL ATTENDANCE	
	1972	1971	1972	1971	1972	1971
Bury St. Edmunds	382	298	1,237	869	2,786	2,299
*Great Cornard	69	—	69	—	255	—
Haverhill	168	103	525	328	1,070	855
Newmarket	148	124	592	393	1,121	978
Sudbury	129	100	410	353	815	682
TOTALS	896	625	2,892	1,943	6,047	4,814

* Sessions commenced February 1972.

Domiciliary Service.

A domiciliary service was introduced in September 1972 in the eastern part of the county, and later extended to the whole area of the county. This service is also provided by the Family Planning Association as the County Council's agent and is designed chiefly for women for whom pregnancy is

undesirable and who are either unwilling or unable to attend a clinic or their own doctor for family planning advice. Five referrals for this service were received by the end of the year.

Dental Care.

I am grateful to Colonel E. Ferguson for the following report on dental care for expectant and nursing mothers:

“There is becoming an increasing demand for inspection and treatment of pre-school children. One reason for this increase would appear to be due to a note we had printed on the back of the consent form we issued at school inspections.

We are down to 50% of authorised establishment and the pressing need is to fill these vacancies as referred to in the school health service section of this report.”

Dental Services for Expectant and Nursing Mothers and Children under 5 years as at December 1972.

Attendances and Treatment

Children 0-4 (incl.) Expectant and Nursing Mothers

Number of visits for treatment during year—

First visit	107	8
Subsequent visits	139	13
Total Visits	<u>246</u>	<u>21</u>

Number of additional courses of treatment other than the first course commenced during year.

7 —

Treatment provided during the year—

Number of fillings	106	10
Teeth filled	105	10
Teeth extracted	9	2
General Anaesthetic given	8	1
Emergency visits by patients	3	—
Patients x-rayed	—	—
Patients treated by scaling and/or removal of stains from the teeth (Prophylaxis)	3	5
Teeth otherwise conserved	66	—
Teeth root filled	—	—
Inlays	—	—
Crowns	—	—
Number of courses of treatment completed during this year	93	2

<i>Attendances and Treatment (contd.)</i>	<i>Children 0-4 (incl.)</i>	<i>Expectant and Nursing Mothers</i>
<i>Prosthetics</i>		
Patients supplied with F.U. or F.L. (first time)	—	—
Patients supplied with other dentures	—	—
Number of dentures supplied	—	—
<i>Anaesthetics</i>		
General Anaesthetics administered by dental officers	9	—
<i>Inspections</i>		
Number of patients given first in- spections during year	117	6
Number of patients in (Attendance and Treatment) and (Inspection) who required treatment	34	6
Number of patients in (Prosthetics) and (Sessions) who were offered treatment	34	6
<i>Sessions</i>		
Number of Dental officer sessions (i.e. equivalent complete half days) devoted to maternity and child welfare patients.		
For treatment		44
For health education		-

Speech Therapy.

I am grateful to Miss B. M. Elton for the following report.

“Co-ordination with Health Visitors has increased during 1972 in work undertaken with the pre-school child. Talks and discussions were held and a supply of the pamphlets “Talking is Childs Play” and “Is your child a Stammerer” have been made available for Health Visitors to use at their discretion.

The role of the speech therapist in relation to the young child who is retarded in language development, or who is out-of-step in the maturation of articulation will vary. Some infants with language problems require early diagnosis, and guidance in home management, treatment for them is a real need. While in other cases the children’s need is more in relation to a relaxation of parental tension and anxiety; in such cases the therapist will seek to give support, encouragement and advice, rather than direct treatment.

Now that the staff of speech therapists include one full-time and three part-time therapists, the number of pre-school children seen has increased.

During 1972, 52 pre-school children were seen, and of this number about half received regular treatment, seven of them were discharged during the year, and one left the area."

Maternal Deaths.

One death which came into the category of deaths due to, or associated with pregnancy childbirth or abortion was reported. The mother died four days after delivery. The cause of death was cerebral tumour with haemorrhage and was unrelated to the pregnancy.

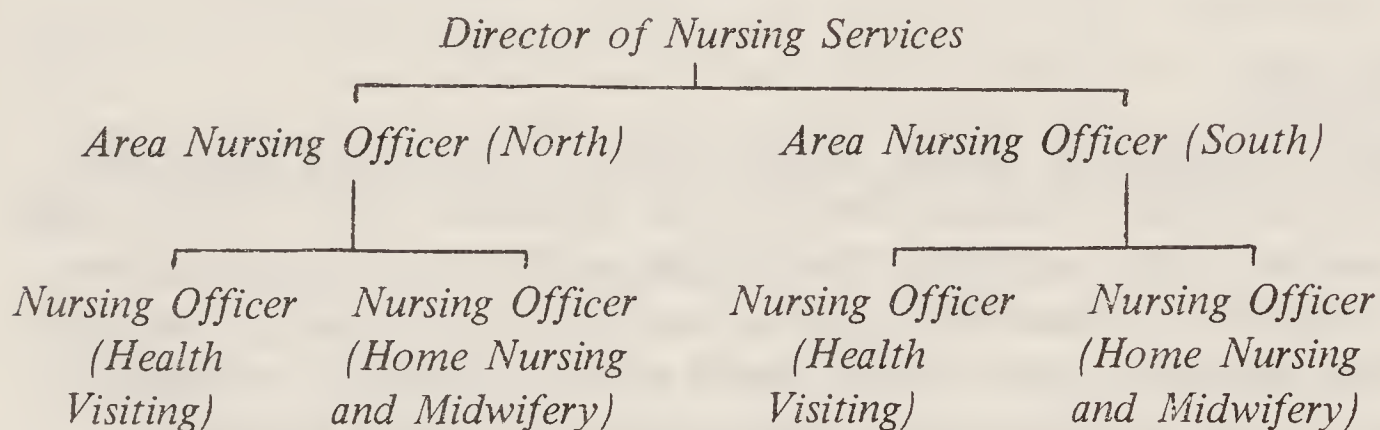
PART IV NURSING SERVICES

GENERAL

Management Structure.

The revised management structure approved by the County Council in 1970 was fully implemented on 1st July, 1972 with the appointment of four nursing officers. The structure follows the recommendations of the Working Party on Management Structure in the Local Authority Nursing Services chaired by Mr. E. L. Mayston, the principle of which is that a line management structure is substituted for the functional arrangements whereby there are separate structures for health visiting and for home nursing and midwifery. Functional management occurs only at the first line, nursing officer level. The advantages of this system include greater supervision and support of the nursing staff in the field and it prepares the way for integration of the hospital and community nursing services which will take place when the National Health Service is re-organised in 1974.

The county has been divided into a northern area, comprising the Borough of Bury St. Edmunds and the Rural Districts of Mildenhall, Thedwastre and Thingoe and a southern area comprising the Boroughs of Newmarket and Sudbury, the Urban Districts of Haverhill and Hadleigh and the Rural Districts of Clare, Cosford and Melford. The diagram below shows the new structure:—



Attachment of Nurses to General Medical Practitioners.

Attachment to a general medical practice is intended to foster team work between general practitioners and domiciliary nurses and is of the greatest importance in the integration of the two professions. The principle of the scheme is that nurses instead of working in a geographical area, deal with the patients of a practice wherever they may live. On 30th September, 1972, 80% of health visitors and 60% of home nurses were so attached, an improvement on the situation in 1971.

Hospital Liaison.

Liaison with the hospitals of the West Suffolk Group was started in 1961. The essence of the scheme is the planned discharge of patients whose medical condition is suitable subject to the home environment and family circumstances being assessed by a health visitor, who will, if necessary arrange for aids, adaptations or services by the relevant departments. This liaison was further extended in 1972 by the appointment of a full-time health visitor liaison officer based and accommodated at the West Suffolk General Hospital.

In addition to the full-time health visitor, certain other health visitors carry out liaison in a part-time capacity for particular specialities or disease groups, for example geriatrics, psychiatry, diabetes and in the accident and emergency department. The last is of particular importance in that it is possible to detect babies and children at risk of deliberate injury, the so-called "battered baby syndrome".

In addition to this liaison with the hospitals in West Suffolk two health visitors are attached in a part-time capacity to the Colchester Hospitals and the Heath Road Wing of the Ipswich and East Suffolk Hospital, in the speciality of paediatrics.

Nurse Education.

Integrated training of student nurses, leading to both State Registration and the National District Nursing Certificate, is conducted jointly with the West Suffolk General Hospital and the first twelve students have now completed their training period and obtained their qualifications. Six pupil midwives completed their training during the year and two health visitors successfully completed their course during which they were sponsored by the County Council.

In addition to formal training for the qualifications shown above a considerable amount of nurse education is conducted in co-operation with the West Suffolk General Hospital. All student nurses during their first and second years of training receive lectures from members of the County Health Department on community health and nursing and many students undertake visits of observation with health visitors and home nurses. Reciprocal study days have continued and form a useful forum for discussion of matters of common interest.

Practical field work instruction has continued with Health Visitor students from the Ipswich Civic College, four of whom were received during the year. In addition student health visitors from the University of Surrey and Chiswick Polytechnic were attached to rural health visitors for periods of one week in order to obtain experience of working in the country.

Housing.

26 houses were provided for accommodation of nurses during the year. These comprised 18 owned by the County Council and 8 rented from County District Councils.

Houses are provided by the Council where required and the Authority is indebted to the County District Councils for their co-operation. Only where the Housing Authority is unable to provide a house and all other means have failed, does the County Council purchase one. It is the County Council's policy to provide housing for district nurses and midwives, who need to live near the area in which they work. Houses are also rented

Midwifery.

The number of births in 1972 was 2,571 of which 447 (17%) were home deliveries; this represented a fall from the 1971 domiciliary confinement rate which was 20%. As a result of this and of the fall in the birth rate overall it was possible to replace three nurse/midwives with general trained nurses. In addition to the births recorded above 284 were notified by the U.S.A.F. Hospital at Lakenheath.

The arrangements whereby the Council's midwives deliver their patients in hospital continued. The basis of this scheme is that mothers booked for this arrangement are cared for by their family doctor and midwife, and discharged from hospital to their own homes shortly after confinement. The advantage is that if any medical complications occur hospital medical services are on hand. Details of these confinements are given below:—

	1972	1971
West Suffolk General Hospital	54	34
St. Leonard's Hospital, Sudbury	46	65
Newmarket General Hospital	<u>9</u>	<u>24</u>
	<u>109</u>	<u>123</u>

Midwives give care to their mothers and their babies discharged from hospital before the tenth day after delivery and the numbers of these patients was as follows:—

	1972	1971
Discharged within 48 hours	560	
		1,680
Discharged after 48 hours	<u>1,550</u>	<u> </u>
	<u>2,110</u>	<u>1,680</u>

Relaxation and Mothercraft Classes.

Number of women attending during year:

	1972	1971
Institution booked	407	523
Domiciliary booked	<u>84</u>	<u>177</u>
Total	<u>491</u>	<u>700</u>
Total attendances	<u>2,857</u>	<u>3,248</u>

Courses in relaxation and mothercraft are held at all health clinics and in hired premises at Hadleigh, Brandon, Kedington and Nayland. Each course consists of eight consecutive classes, and mothers are encouraged to attend a complete course. The classes are conducted by midwives or health visitors, and family planning advice has now been introduced into the syllabus.

The fall in the birth rate is reflected in the decrease both in the number of women attending and in the number of attendances made.

Home Nursing.

Details of the work carried out are as follows:—

	1972	1971
Number of patients nursed	8,597	6,522
Number of the above under 5 years	1,074	199
Number of the above over 65 years	<u>3,432</u>	<u>1,940</u>
Total number of visits or treatments	<u>113,762</u>	<u>99,207</u>

A total of 3,215 (included in 1972 figures above) patients were treated in their family doctors' surgeries, a further instance of the closer working pattern made possible by the attachment of nurses to general medical practices. In 1971 the total was 2,286.

Nursing Aids and Equipment.

The depots are being reorganised to provide seven area depots and about 15 supporting sub-depots and will provide, as previously, simple equipment such as commodes, toilet aids, back rests and invalid chairs. This service is provided by the British Red Cross Society on an agency basis. The more sophisticated equipment such as hoists, ripple mattresses and special beds were usually provided through the Martineau Trust Fund, The Marie Curie Memorial Foundation, or direct by the Health Department, as appropriate.

Plans were made during the year for the introduction in 1973 of a central sterile supply service, provided by the West Suffolk General Hospital on repayment, to be implemented for nurses throughout the county: thus bringing them into line with their hospital colleagues with adequate supplies of properly pre-sterilised instruments, dressings and other items.

Night Sitting.

A small number of patients were provided with night nurses or night sitters due to the generosity of the Marie Curie Memorial Scheme. It is hoped to extend this service in the coming year.

HEALTH VISITING

The following table gives details of the persons or households visited and the number of visits made by the health visitors.

TYPE OF CASE	1972		1971	
	No. of cases	No. of visits	No. of cases	No. of visits
Children born during the year	2,979	12,566	3,162	38,473)
Other children under 5	6,331	21,293	11,596	
Persons aged 5-16	400	942	*	*
Persons aged 17-64	1,424	3,335	*	*
Persons aged 65 and over	1,324	3,748	1,933	5,333
Households visited on account of tuberculosis	26	46	41	44
Households visited on account of other infectious disease	43	82	53	*
Households visited for any other reasons	210	788	2,521	12,190
	12,737	42,800	19,306	56,040

*not available.

These statistics include 55 mentally handicapped and 128 mentally ill persons visited in 1972, and 303 mentally disordered persons visited in 1971.

The health visitor's work, now that she has been relieved of her duties with regard to the Home Help Service and the Register of Child Minders, is increasingly concerned with health education and with the health of the school child, and closer liaison with general practitioners and with the hospitals is helping to concentrate visiting to those with the greatest need.

PART V

PREVENTION OF ILLNESS CARE AND AFTER CARE

Health Education.

General.

During the year steady progress outlined in the 1971 report continued, increasing both the quality and quantity of health education in West Suffolk.

Total health education sessions rose from 328 to 474 covering an audience of 15,112, a rise of 1,615. The numbers involved covered a cross section of society from school children to the more senior citizens. Three very successful study days were added to the growing list of permanent activities.

In September a course designed to help decrease the number of road-side deaths was arranged called "Managing Someone Else's Car Crash". This covered immediate first aid care of motor accident victims and was attended by essential car users of the County Council.

"Keeping Fit in Retirement" arranged in December at the West Suffolk General Hospital, was attended by over 200 pensioners. Talks and films included "Eating Well on a Budget", "How to Keep Fit", "Aids for the Elderly", and "Benefits you Can Claim".

The study morning "Healthy Swimming Pools" was arranged for schools with their own pools. Talks on mechanical plants and their maintenance, problems of water testing, pH content and the use of chemicals, and the spread of infectious diseases together with a practical demonstration made for a successful course for the headmasters and caretakers who were present.

The addition of these three days brought the number of regular study days to six.

Schools.

Six more schools have introduced health education into the school curriculum with appropriate topics for each age range. The principal subjects covered are cleanliness (personal and environmental), prevention of infectious diseases, baby care, artificial resuscitation, smoking, drugs and venereal disease.

Adult Education.

An anti-smoking campaign was mounted at the College of Further Education, using questionnaires, films, and lectures over a 14 week period. Lunchtime talks on family planning were also arranged for the students.

A series of film shows and lectures of family planning was held at each of the main clinics.

Other courses arranged for adults included "Nursing the Family at Home" for a Parent Teachers Association, a slimming clinic and Youth Club courses.

In each case support for the courses has been given by the willingness of many members of the Health Department as well as general practitioners in the areas who attended the courses to give lectures or lead discussion.

A one-day exhibition of Health Education equipment and materials was held at the Autumn Fayre, and displays on various topics have circulated the libraries.

Visual aid bookings again showed an increase:

<u>1972</u>	<u>1971</u>
389	862

This increase in use of visual aids and equipment was not entirely due to the increase in talks arranged by the health education section, but also by the demand of professional staff for in-service training of public health inspectors, integrated nursing students, and ambulance personnel.

Twenty new leaflets have been added to the already large selection.

The health education section has been most fortunate this year in being able to add modern colourful and up to date visual aids to the Resources Centre and thus dispense with the more dated and less effective ones. It is satisfying to meet requests for visual aids as they arise and for those undertaking health education to have appropriate material at hand with which to illustrate their talks.

Medical Arrangements for Immigrants.

The following table gives details of visits made to immigrants (excluding Uganda Asians) visited during the year. The figures in brackets refer to 1971.

COUNTRY Where passport was issued, as stated by Port Health Authority	Number of advice notes received during the year from ports and airports relating to arrival of immigrants	Number of first successful visits paid to im- migrants during the year
	(1)	(2)
(A) COMMONWEALTH COUNTRIES		
(i) Caribbean	— (1)	— (1)
(ii) India	5 (2)	5 (2)
(iii) Pakistan	— (—)	— (—)
(iv) Other Asian	21 (8)	19 (8)
(v) African	5 (5)	3 (5)
(vi) Other	— (4)	— (4)
TOTAL	31 (20)	27 (20)
(B) NON-COMMON WEALTH COUNTRIES		
(i) European	2 (1)	2 (1)
(ii) Other	1 (3)	— (3)
TOTAL	31 (4)	27 (4)
GRAND TOTAL	34 (24)	29 (24)

Tuberculosis.

Notifications.

Arrangements for the supervision of tuberculosis patients continued. The number of notified cases of tuberculosis known to the department at the end of 1972 was:—

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Pulmonary	75	52	127
Non-Pulmonary	<u>5</u>	<u>9</u>	<u>14</u>
Total cases	<u>80</u>	<u>61</u>	<u>141</u>

Particulars of new cases of tuberculosis, and the one death from this disease, are shown in the following table.

NEW CASES				DEATHS					
Age Periods	Pulmonary		Non-Pulmonary		Age Periods	Pulmonary		Non-Pulmonary	
	M	F	M	F		M	F	M	F
0-15	—	1	—	—	0-15	—	—	—	—
20—	—	—	—	—	20—	—	—	—	—
25—	1	—	—	—	25—	—	—	—	—
35—	2	2	—	—	35—	—	—	—	—
45—	—	1	—	—	45—	—	—	—	—
55—	1	—	—	—	55—	—	—	—	—
65—	1	2	—	—	65—	—	—	—	—
75+	—	1	—	—	75+	—	—	—	1
TOTALS	5	7	—	—	TOTALS	—	—	—	1

The total number of primary notification of tuberculosis amounted to 12 (all pulmonary) compared with 12 (7 pulmonary, 5 non-pulmonary) in 1971.

Examination of Contacts.

The consultant chest physician invited 180 contacts to attend at Newmarket Hospital, West Suffolk Hospital or St. Leonard's Hospital, Sudbury. One hundred and sixty nine attended. This gave an average of 5.2 contacts for each new case.

After Care.

A total of 46 domiciliary visits was made by health visitors who continued to work in close liaison with the Consultant Chest Physician.

Chiropody Service.

The chiropodists treated 2,315 patients during the year compared with 2,069 in 1971. The total number of treatments given was 9,891 compared with 8,633 in 1971. All but 33 of the patients were aged persons (men of 65 and over; and women of 65 and over) — homes for the elderly not being included.

Clinics were held at thirty-six centres in the county and the chiropodists continued to visit homes for the elderly, both private and authority maintained and groups of old people's dwellings. They gave 3,980 domiciliary treatments to house-bound patients (40% of total treatments).

Renal Dialysis.

Circular 2/68 provides for local authorities to convert a room in the home of a patient requiring renal dialysis in order to allow that patient to leave hospital and continue treatment at home. Such a case was referred during the year, and adaptation of a suitable room had already been commenced. The conversion was completed satisfactorily and the patient subsequently returned home.

Cervical Cytology.

No. of recall letters sent	No. of follow-up letters sent	No. of cervical smears subsequently repeated	No. of cervical smears already repeated prior to recall
585	99*	277	53

* January–September 1972.

The routine recall of women for periodical re-examination under the national scheme of screening for the prevention of cancer of the cervix was instituted on 1st January, 1972—the tests being carried out by general practitioners. Many local schemes had incorporated a system of recall in a shorter period with the result that a number of women had already had repeat cervical smears within the five year recall period. A further 22 women had had major gynaecological surgery since their original tests.

A great deal of appreciation for this service has been expressed.

PART VI

AMBULANCE SERVICE

Year	Grand Total		Ambulances		Sitting Case Cars		Taxis		Railway		Air	
	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage	Patients	Mileage
1968	117,856	1,146,463	18,406	164,471	99,362	977,692	29	260	59	4,040	—	—
1969	122,923	1,156,707	19,961	173,125	102,896	978,138	29	373	35	4,581	2	490
1970	148,477	1,263,858	22,269	179,518	120,068	1,079,012	69	448	91	4,880	—	—
1971	139,587	1,349,512	20,101	179,734	119,265	1,164,773	168	1,140	53	3,865	—	—
1972	141,659	1,494,150	18,675	188,339	122,541	1,302,894	425	1,682	18	1,235	—	—

The average miles per patient was 10.6 compared with 9.7 for 1971. The total mileage of all patients in this area showed an increase of 10.7% on that of the previous year.

Ambulances.

The total mileage shows an increase of 4.7 compared with 1971. The average miles per patient was 10 compared with 8.9 for the previous year.

Sitting Case Cars.

This mileage includes both the Council's own vehicles and that of the Hospital Car Service. The mileage of 1,302,894 is an increase of 11.8% on that of the previous year. This meant an average of 10.6 miles a patient compared with 9.7 for the previous year. The mileage incurred in taking trainees to the adult training centre was 337,813, which was 38.5% of the total for sitting case cars. The greatest increased element was that of conveying patients to the day hospitals at Bury St. Edmunds, Sudbury and latterly at Newmarket.

Taxis.

This form of transport is used for the conveyance of school children when an ambulance is not required. It will be seen that the number of patients carried was significantly higher than that for previous years although the actual mileage was not great.

Railway.

Much less use of this type of conveyance was used than in the previous year. However, wherever practicable railway transport is still used to convey patients who have to be admitted for some specialised treatment not available locally. I would like to express appreciation to the staff of British Rail and the London Ambulance Service who were involved with most of the patients conveyed in this way.

Hospital Car Service.

Due mainly to the functioning of day hospitals the use of the Hospital Car Service showed a marked increase. The service continued to form a very important adjunct to the main service. There were 43 registered cars on 31st December. This section of the report would not be complete without paying tribute to the drivers of the Hospital Car Service who give so much of their time, many of them on a quite voluntary basis.

Staff and Vehicles.

	<i>Number of Staff*</i>	<i>Number of Vehicles</i>	
		<i>Ambulances</i>	<i>Sitting Case</i>
Bury St. Edmunds	8	3	3
Haverhill	6	3	—
Newmarket	5	3	1
Mildenhall	4	1	1
Sudbury	8	3	1

*This includes an ambulance station supervisor.

The Mildenhall ambulance station was brought into use on 7th September and the ambulance drivers' houses (2) were occupied on 7th August.

Development.

Ambulancemen as necessary continued to attend the Regional Ambulance Training Centre at Danbury, Essex. I am pleased to report that Mr. P. B. Ungless, Station Supervisor at Bury St. Edmunds, succeeded in obtaining the Training Instructor's Certificate of the Department of Health and Social Security.

Meetings between ambulance station supervisors and members of headquarters staff continued; and as remarked previously these have proved invaluable.

On the question of ambulance stations it was decided after full discussion that the projected ambulance station at Hadleigh should not be built in view of the imminence of National Health Service reorganisation. However, the Sudbury station was strengthened to cope with the more routine journeys to relieve the over the border arrangements that have existed with the East Suffolk County Council for the conveyance of emergency cases from their station at Bramford.

There were 29 entrants for the Safe Driving Competition of the Royal Society for the Prevention of Accidents and all succeeded in passing.

PART VII OTHER SERVICES

Health Centres.

Substantial progress was made with the planning of the health centre at Woolpit and the extension of the existing health clinic at Blomfield House, Bury St. Edmunds to form a health centre. At the end of the year tenders had been received for both projects and early starts were anticipated. The sketch plan of the Woolpit health centre is shown opposite.

Requests for the provision of health centres at Hadleigh and at Bildeston were received from the National Health Service Executive Council for West Suffolk. Both of these requests were agreed by the County Council and the projects were placed in the capital building programme. In the case of Hadleigh the project replaced a health clinic which had been planned for a building start in 1972/73 and for which a site was already owned by the Council.

The acquisition of sites for health centres continues to prove difficult and it is gratifying to report that at the end of the year negotiations were well advanced for the purchase of a site for the proposed health centre at Haverhill.

The health centre building programme at 31st December, 1972 was as follows:—

HEALTH CENTRE	YEAR OF BUILDING START	G.P. CONSULTING SUITES TO BE PROVIDED
Bury St. Edmunds (conversion of Blomfield House from a health clinic)	1972/73	9
Woolpit	1972/73	3
Hadleigh	1973/74	5
Haverhill	1974/75	8
Bildeston	1975/76	3
Sudbury	1975/76	To be decided

Registered Nursing Homes.

The number of registered nursing homes in the county has now risen to 5. One new home of 15 beds was opened during the year and one of the existing homes increased its number of beds to provide accommodation for a further 15 patients.

The total beds available is now 115.

There are no maternity beds, nor are there any of the homes licensed under the Abortion Act.

East African Asian Refugees.

General.

During August 1972 the government decided to accept into the United Kingdom Asians holding U.K. passports who had been given notice to leave Uganda, and Medical Officers of Health were warned that immigrants might arrive in their area and also that they might be asked to assist in arranging appropriate medical services if it became necessary to set up transit accommodation. On 1st September the Department of Health and Social Security informed us that it was proposed to set up the first of these transit camps at the former R.A.F. station at Stradishall and we were asked to arrange health screening of those who had not been screened at the airport of entry and also, in conjunction with the Executive Council for West Suffolk, the general medical and nursing care of refugees at the camp. The local general practitioners kindly agreed to provide general medical care and plans were made for screening to be carried out by the staff of the health department. The first refugees arrived on September 18th, by which time a building at the camp had been furnished and equipped as a medical centre. By 8th November, the deadline for their expulsion from Uganda, 3,146 refugees had entered the camp and 1,921 had left it for resettlement in various parts of the United Kingdom. By the end of the year a further 23 had arrived and the total at the camp was 757. The peak of admissions was on September 27th when 530 refugees arrived at the camp and were screened.

Screening.

Screening consisted of an examination of health documents, followed by a medical interrogation by a doctor and health visitor working together and a brief clinical examination. All those who did not hold valid international certificates of smallpox vaccination were vaccinated against this disease and children under 13 years of age were offered B.C.G. vaccination. All over the age of 13,

with the exception of mothers in the first three months of pregnancy, had mass miniature chest radiographs taken.

A proportion of the refugees were exhausted and bewildered on arrival at the camp but apart from this their general health was good and comparable to a similar European population. 49 had abnormal chest x-rays and of those whom it was possible to follow up before they left the camp 4 were found to be needing treatment or close supervision and a further 22 to require occasional supervision only. Haemoglobin estimations were made on 238 women and children, as part of a nutrition survey carried out by the London School of Hygiene and Tropical Medicine, and 36 of these (15%) showed levels of less than 12 grams per 100 ml. Stool samples were taken from intending good handlers and also at regular intervals from the camp drainage system and in no case were dysenteric or food poisoning organisms detected.

General Health Care.

Daily surgeries were held, initially by the local general practitioners, but it soon became evident that the workload was too great for them and the Executive Council appointed a camp doctor. He was assisted by members of the county nursing staff and volunteers, both members of organisations and individuals. Routine child health and family planning clinics were instituted.

The surgery attendances were heavy but as was apparent during the screening process the spectrum of illness was little different from that normally seen in this country. The camp was the nearest to Stansted airport and in consequence handicapped, elderly and frail refugees, whom it was thought would not easily stand a long journey to other camps, were sent to it and the camp also received patients who had been admitted to hospital directly on arrival at Stansted airport and this weighting of the camp population with dependent patients added to the load on the health services. Three cases of malaria, all *P. falciparum*, occurred. Seven expectant mothers were delivered of their babies in hospital, and there was a small outbreak of measles.

PART VIII

ENVIRONMENTAL HEALTH SERVICES

Inspection and Supervision of Food.

The sampling of foodstuffs is carried out under the supervision of the County Medical Officer of Health, by the staff of the Weights and Measures Department, who reports as follows:—

Milk.

Pasteurising Plant.

Only one pasteurising plant is now operating in the County. 18 samples were obtained at this plant during the year, all of which passed the phosphatase test. 16 passed the methylene blue test whilst 2 were not tested due to the temperature being in excess of 70° F.

Other samples of milk treated at this plant were taken on the retail rounds and are included in the next item.

Dairies.

All the dairies in the County were inspected during the year and the number of premises licensed are as follows:—

Dealers (Pre-Packed milk) licences	— 185
Dealers (Pasteurised milk) licences	— 1
Dealers (Untreated milk) licences	— 3

Details of the tests are as follows:—

	PASSED	FAILED	INVALID OR NOT TESTED	TOTAL
Untreated Methylene Blue	20	1	—	21
Pasteurised Phosphatase	262	2	—	264
Methylene Blue	222	15	27	264
Sterilised Turbidity	1	—	—	1
Ultra Heat Treated	3	—	—	3

Investigations were made when samples were found to be unsatisfactory.

Infected Milk.

Twenty-two samples of untreated milk sold by retail were submitted for biological examination. All were found to be free from infection.

School Milk.

Samples of pasteurised milk supplied to all the schools, who are now entitled to free milk, were sent for examination. Only in two cases did the milk fail the methylene blue test; all passed the phosphatase test.

Sampling for Quality.

One hundred and sixty one samples were purchased, of which only three were reported as unsatisfactory due to small deficiencies in fat. No case of added water was found.

Complaints of lack of cream were investigated but, though the "cream line" was absent, the milks were satisfactory. Other complaints included those of mould and a moth in a bottle of milk. "Bitty" cream was a source of some trouble during the warmer weather.

Other Foods.

Two hundred and fifty five samples of foods other than milk were obtained.

To cover as wide a field as possible, all the sampling officers in Norfolk and Suffolk circularise details of foods sampled each quarter. By this method, duplication of sampling is to a large extent avoided and a wider variety of foods sent for analysis.

The finding of foreign bodies in foodstuffs has been the cause of most of the problems investigated. The public are more critical and call our attention to the faults much more readily than they did ten years ago.

The labelling of foodstuffs has also received our attention, as proper description and legible lists of ingredients are necessary so that the consumer can be aware of the true contents of the tin or packet.

The sampling of baby foods for the presence of lead was undertaken as part of a nationwide investigation. All those taken in this County were satisfactory but, complaints from consumers that such foods contained mould, a wood screw and black fragments were investigated and action taken.

Samples of yoghurt were sent for analysis to obtain information about fat contents. Two "low fat" yoghurts were criticised by the Analyst because they contained 2.7% and 3.8% of fat respectively. The Analyst considered 1.5% fat as the maximum for this type of product.

At least three complaints were received that sugar contained salt. Certainly salt was in the sugar but it was impossible to rule out accidental adulteration. The precautions taken at the packers is such that, unless there was deliberate sabotage, it would be impossible for this type of contamination.

Tinned fruit was found to contain, in one case, a centipede and in the other, bitumen. Both these were tinned abroad and legal action would be difficult.

Tinned prunes were found to contain 430 parts per million tin, the maximum should not exceed 250 parts per million. Prunes are difficult to can as, after a fairly short period, they attack the metal on the inside of the can. The can in question had been packed and held in stock for a long period so cautions were given to the wholesaler and retailer.

Other articles containing foreign bodies included milk pudding with wooden splinters, a soft drink with a needle, a cake with a piece of finger nail, sausages with a plastic rod and a metal nut and canned soup with feathers. Action was taken against a number of packers for these faults.

PART IX SCHOOL HEALTH SERVICE

STATISTICS

School Population.

In January, 1973 there were 29,636 children on the roll of maintained schools in the County, an increase of 1,635 on the figure for last year and there were also 79 children taught in nursery classes during the year. The numbers of children in the various types of maintained schools are shown in the table which follows. The number of children in special schools maintained by the County are shown later in this report.

TYPE OF SCHOOL	NUMBER OF SCHOOLS	NUMBER OF ROLL
Primary ..	102	16,859
Middle ..	13	6,073
Upper ..	6	4,955
Secondary ..	3	1,749
TOTAL	124	29,636

MEDICAL INSPECTIONS

The system of selective medical inspections has continued. The system of medical inspections adopted by the School Health Service has moved progressively away from routine medical inspections of pupils, and is now in West Suffolk entirely selective. Children are therefore examined in school at request of parent, or teacher, or as a result of information, either already known to the Department or received from hospital specialists, family doctors and health visitors. Child health clinics, also developmental paediatric assessment clinics although few in number, contribute information, and a major emphasis is placed upon early assessment of handicaps in the pre-school years.

Many of the physical and mental handicaps which affect school progress do develop during the important early years at school, and much does indeed depend upon one being alerted by teachers.

A Keystone Vision Screener is now being used by the school nurse. It is hoped that this will lead to the more efficient detection of children suffering from vision defects.

Tables I, II and III, at the end of this section of the report, give statistics concerning the various types of medical inspections made.

Personal Hygiene.

During the year 10,178 individual hygiene examinations were carried out in schools and 56 children were found to have vermin in their hair.

In the autumn term it was reported that a number of children in a town in the southern part of the county were suffering from an infestation of vermin. The school nurse visited every school in the area, made over 3,000 individual examinations, and found only six children to have vermin in their hair.

The following table shows the number of children found to have vermin in their heads in each of the last five years.

YEAR	TOTAL NUMBER OF INDIVIDUAL EXAMINATIONS	TOTAL NUMBER OF INDIVIDUAL CHILDREN FOUND TO BE INFESTED
1968	3,741	69
1969	7,869	94
1970	6,762	47
1971	4,064	38
1972	10,178	56

Handicapped Pupils.

Assessment.

Children suffering from a particular handicap are reviewed regularly from birth. Children who are thought to be backward are assessed by a medical officer as early as possible. Both the Education Department and the Social Services Department are kept informed of any children who may later require special education. Parents are kept informed of the children's progress and the likely future educational requirements are discussed.

Children with physical defects are also reviewed. In many cases children with quite severe handicaps can be managed in the ordinary school environment. As this may lead to a strain on a particular school the medical officer usually discusses the implications with the respective head teacher. In many cases ancillary help is provided by the Education Department to help the school cope with handicapped children.

E.S.N.

The new Priory School for E.S.N. Children in Bury St. Edmunds opened in November, 1972. Owing to building delays, only part of the school is functioning at the moment with 51 pupils including 5 boarders. The school should be completed later this year and will eventually accommodate 48 boarders and 52 day pupils.

Maladjusted.

The child psychiatrist and his team saw 279 children at hospitals in Bury St. Edmunds and Sudbury, during the year. This naturally meant an increase in the number of children awaiting admission to the Hampden House Hostel.

Deaf and Partially Hearing.

The opening of another unit at a middle school in the county has proved very successful, there are now 9 children of primary school age and 9 children of middle school age who in previous years would have been considered for special schooling in Residential Schools for the Deaf or Partially Hearing.

Physically Handicapped.

Forty-seven children attending the ordinary school were classified as having some defect. One school in particular dealt very well with two children who are suffering from spina bifida. Five children attended special out county schools.

Delicate Children.

Thirty children were classified as having handicaps in the ordinary school, also 17 with asthma, 25 with diabetes, 77 with heart defects and 43 others were noted with mild defects.

Epileptic Children.

Fifty-nine children were noted at ordinary school.

Education in Hospitals.

Three hundred and seventy-eight children resident in West Suffolk received education in hospital for varying periods. Included in this figure are 33 children who were taught in hospitals outside the county.

Report of the Principal School Dental Officer.

The staff position has remained the same as last year and the vacancy for a Senior Dental Officer has remained unfilled.

The Principal School Dental Officer, Mr. S. H. Pollard retired on 31st December. Col. E. Ferguson, M.B.E. was appointed to succeed him with effect from 1st January, 1973.

Broken appointments still present a problem, but the use of special transport has been of considerable help, especially where parents have been unable or unwilling to bring younger children, who cannot safely be allowed to make their own way to the static clinics.

It will be noted that the number of sessions further to general anaesthetics has increased considerably and these sessions have been greatly appreciated, as demonstrated by the high attendance rate.

It is essential that active steps must be taken to encourage recruitment of at least two additional Dental Officers as a large area in the North of the County is still uncovered.

See Table IV.

Speech Therapy.

During the year the speech therapists treated 412 children, of these 113 were discharged. The corresponding figures for 1971 were 389 and 68.

Miss B. Elton, senior speech therapist, has supplied the following comments:—

During 1972 3 part-time and 1 full-time speech therapist have been employed in the School Health Service. The needs of a total of 412 children have been cared for by this team, of which number 113 were discharged during the year. In most cases those discharged were considered free from requiring further therapy, but one in two children whose parents left the area were referred elsewhere for further speech therapy.

The therapists have, where possible, organised their work in the way considered best suited to the children concerned. Some were seen at the school and others at the central clinics of Newmarket, Haverhill, Bury St. Edmunds and Sudbury, while a few children were visited regularly at their homes.

The aim to co-ordinate with workers in allied fields such as health visitors, teachers, educational psychologists and remedial teachers, has been better realised in 1972, for with the improvement in the staff situation it has become increasingly possible to extend communication with other services.

In October 1972 a further amelioration in staff establishment, of 0.5 of a speech therapist was agreed, and this agreement has since been ratified.

Heaf Testing and B.C.G. Vaccination.

The following figures exclude those Heaf positive due to earlier B.C.G. vaccination.

YEAR BORN	NUMBER TESTED	POSITIVE 1 & 2	POSITIVE 3 & 4
1955	2	—	—
1956	31	1	—
1957	295	32	5
1958	487	35	6
TOTAL	815	68	11

The number of children tested fell in 1972. In 1971, 1,846 children were tested, the fall was mainly due to the lack of medical staff available.

Rubella.

Figures for rubella vaccinations were not kept in 1972 although an estimated 450 girls were vaccinated between their 11th and 14th birthdays.

Milk in School Scheme.

As was reported last year new regulations (The Provision of Milk and Meals) (Amendment) Regulations 1971, limited the duty of the local education authority to provide free school milk to pupils in special schools and to pupils in other maintained schools up to the end of the summer term after they attain the age of 7 and other pupils in primary schools and junior pupils in all age and middle schools where a School Medical Officer certifies that the pupil's health requires that he should be provided with milk at school. At a day taken at random in October the number of children taking milk was as follows:—

Primary Schools	6,614
Special Schools	82
Non-Maintained Schools	305

Fourteen of these children were receiving milk on health grounds.

School Psychological Service.

By the end of 1972 the staff of the School Psychological Service consisted of: 1 Senior Educational Psychologist; 2 Educational Psychologists; 2 Social Workers; 1 Senior Remedial Advisory Teacher and 5 Remedial Advisory Teachers.

The traditional work of the service continued in offering consultation, advice and educational and psychological treatment in schools throughout the area and in 7 Educational Guidance Centres at Bury St. Edmunds, Brandon, Haverhill, Newmarket, Sudbury, Hadleigh and Mildenhall. Children and parents were also often seen in their own homes.

Close links were maintained with the Psychiatrists and Social Workers from the Institute of Child and Family Psychiatry and with the Social Workers from the West Suffolk Social Services Department, and also with the Medical Officers from the School Health Service.

Well over 100 children were seen each week on a regular basis in the part-time Education Guidance Centres and a similar number were helped each week at the Remedial Centre in St. Mary's Infants School, Bury St. Edmunds. In the course of other duties the Remedial Advisory Teachers gave part-time help to some 250 children each week in their own schools. The two social workers each carried heavy case loads of around 100 cases and intensive work was necessary in about 40 of the 100 cases at any one time, whilst the remaining cases were regularly but less frequently visited. The Psychologists were faced with demands to see an increasingly large number of new cases which meant some curtailment of continuous treatment cases and systematic review.

Members of the School Psychological Service continued to make substantial contributions to the In-Service Training programmes of teachers and other professional workers in the county, the region and the country at large.

Education at Home.

Sixteen children were taught at home during the year. The following table shows the number of handicapped pupils at, or awaiting vacancies at special schools or hostels.

	Blind	Partially Sighted	Deaf	Partially Hearing	Physically Handicapped	Delicate	Maladjusted	Educationally Sub-normal	Epileptic	Speech Defects	TOTAL
At special schools or hostels ..	3	1	6	—	5	7	36	61	1	—	120
At independent schools ..	—	—	—	—	—	—	3	—	—	—	3
Awaiting admission to special schools or hostels ..	—	—	—	—	—	—	18	—	—	—	18
TOTAL ..	3	1	6	—	5	7	57	61	1	—	141

The number of children attending Riverwalk and Hillside Schools increased during the year. The medical classification of the children was as follows:—

Severely sub-normal	70
Subnormal	12
Physically Handicapped	1
Blind & Physically Handi- capped	1
Autistic	1
	<hr/>
	96

Another autistic child left Riverwalk School late in the year and is now in permanent care at the Ida Darwin Hospital.

School Swimming Pools.

The number of schools with new swimming pools continued to increase. In many cases staff responsible for the care of those pools already established have left, and been replaced by teachers or caretakers in the correct maintenance of swimming pools.

As neglected pools and infected water are a potential hazard to health, head-teachers were invited to a Study Day, organised by the health department, on 12th April. Talks were given by various specialists on the danger of water-borne diseases. In addition members of the staffs of the County Architect and Chief Sampling Officer have continued to advise on the correct maintenance of these pools.

At the end of the year there were 30 swimming pools at schools, compared with 28 in 1971.

TABLE 1

SELECTIVE MEDICAL INSPECTIONS OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS

AGE GROUPS INSPECTED (BY YEARS OF BIRTH)	NUMBER OF PUPILS SELECTED	PUPILS FOUND TO REQUIRE TREATMENT INCLUDING THOSE ALREADY UNDER SUCH TREATMENT		
		For Defective Vision (excluding squint)	For any other Conditions	Total Individual Pupils
1965	—	—	—	—
1964	—	—	—	—
1963	—	—	—	—
1962	—	—	—	—
1961	—	—	—	—
1960	—	—	—	—
1959	—	—	—	—
1958	95	5	12	16
1957 or earlier	38	5	4	8
TOTAL	133	10	16	24

TABLE II
OTHER INSPECTIONS

Number of Special Inspections	237
Number of re-inspections	<u>1,374</u>
TOTAL	<u>1,611</u>

TABLE III

RETURN OF DEFECTS FOUND AT SPECIAL INSPECTIONS
(including defects already under treatment or observations)

DEFECT OR DISEASE	SPECIAL INSPECTIONS	
	Number of Defects	
	Requiring Treatment	Requiring observation only
Skin ..	4	—
Eyes — Vision ..	53	8
Squint ..	—	4
Other ..	—	—
Ears — Hearing ..	4	87
Otitis Media ..	—	—
Other ..	—	1
Nose and Throat ..	1	1
Speech ..	15	19
Lymphatic Glands ..	—	1
Heart ..	4	5
Lungs ..	2	—
Developmental — Hernia ..	—	—
Other ..	3	1
Orthopaedic — Posture ..	1	—
Feet ..	4	1
Other ..	—	1
Nervous System — Epilepsy	—	3
Other..	—	1
Psychological — Development	1	1
Stability..	4	3
Abdomen ..	—	—
Other ..	3	3

TABLE IV
DENTAL INSPECTION AND TREATMENT

(1)	Number of pupils inspected by the Authority's Dental Officers—	
	(a) At periodic inspections	9,962
	(b) At special inspections	<u>201</u>
	TOTAL	<u>10,163</u>
(2)	Number offered treatment	3,229
(3)	Number actually treated	1,714
(4)	Attendances made by pupils for treatment	4,032
(5)	Half-days devoted to: Inspection	78
	Treatment	<u>837</u>
	TOTAL	<u>915</u>
(6)	Fillings — Permanent teeth	1,191
	Temporary teeth	<u>1,214</u>
	TOTAL	<u>2,405</u>
(7)	Extractions — Permanent teeth	162
	Temporary teeth	<u>656</u>
	TOTAL	<u>818</u>
(8)	Administration of General Anaesthetics	439
(9)	Orthodontics: (a) Cases commenced during year	13
	(b) Cases completed during year	5
	(c) Cases discontinued	2
	(d) Appliances fitted	—
(10)	Number of dentures fitted	2

APPENDIX A

HEALTH COMMITTEE

(as at 31st December, 1972)

County Council Members:

Mrs. N. M. Barling
Mr. R. W. Elliott
The Hon. D. H. Erskine (Vice-Chairman)
Mrs. S. D. Gargiulo
Dr. M. E. B. Hayes
Mr. N. C. F. Kells
Mrs. P. J. C. Leader
Miss D. Pleydell-Bouverie
Mr. G. W. Reeve (Chairman of Social Services Committee)
Sir Joshua F. Rowley, Bart., D.L., (Chairman of the County Council)
Mrs. H. M. Russell (Chairman)
Mr. R. S. Ryder, J.P., (Vice-Chairman of the County Council and
Chairman of Finance Committee)
Mr. J. E. Wortley

Other Members:

Mrs. D. Dexter (representing St. John Ambulance)
Dr. B. W. Maitland (representing West Suffolk Local Medical Committee)
Mr. J. W. Morley (representing West Suffolk Executive Council)
Mr. F. H. Pues (representing British Red Cross Society)

EDUCATION COMMITTEE

(as at 31st December, 1972)

County Council Members:

- *Mrs. W. N. Banham, J.P.
Mr. M. D. Cornish
- *Mr. A. T. Dunn (Chairman of Primary Sub-Committee)
- *Mrs. B. J. Dunning
Mrs. E. M. Elkins
- *Mrs. J. M. Gardner
- *Mr. J. H. Garrod (Vice-Chairman of School Welfare & General Purposes
Sub-Committee)
- *Major H. Gilson-Taylor (Chairman of School Welfare & General Purposes
Sub-Committee)
- *Mr. A. Herbert (Chairman)
Mr. J. S. Hesketh
Mr. W. A. Howes
- *Mr. J. W. H. Knight (Chairman of Further Education Sub-Committee)
Mr. B. A. M. Lingwood
Mr. R. Wickham Partridge
- *Mr. R. C. Poole (Vice-Chairman)
- *Sir Joshua F. Rowley, Bart., D.L. (Chairman of County Council)
- *Mr. R. S. Ryder, J.P., (Vice-Chairman of County Council and Chairman
of Finance Committee)
- *Mr. J. D. Sheerin (Chairman of Secondary Education Sub-Committee)
Mr. A. J. Smart
Mr. M. R. Whitworth
- *Mr. L. J. Widdicombe
- *Mrs. E. L. York

Other Members:

- Mr. S. G. Harries, M.A., (representing Council of Senate of University
of Cambridge)
- The Rev. Canon D. B. Measures (representing Diocesan Education
Committee)
- The Rev. D. Harper (representing Free Church Federal Council)
- *The Rev. Father R. Kerby, M.A., (representing Roman Catholic Church)
- *Mr. J. Barker (representing Teachers in Primary Schools)

- *Mr. D. E. Loades (representing Teachers in Secondary Modern Schools)
- *Mr. R. W. Ellison (representing Teachers in Grammar Schools)
- *Mr. G. C. Williams (representing Teachers of Further Education)

Nominated by County Council:

- Mr. D. Alston
- *Mr. A. Johnson
- Mr. E. L. Harber
- 1 Vacancy

** Members of School Welfare and General Purposes Sub-Committee.*

APPENDIX B

SENIOR STAFF

(as at 31st December, 1972)

County Medical Officer of Health & Principal School Medical Officer:

D. G. H. Patey, M.A., B.M., B.Ch., M.F.C.M., D.P.H.

Deputy County Medical Officer of Health & Deputy Principal School Medical Officer:

*E. Kinnear, M.B., Ch.B., M.F.C.M., D.P.H.

Senior Administrative Officer:

E. White

Senior Medical Officer:

Mrs. D. M. Walker, M.B., Ch.B.

Medical Officers in Department:

L. B. Gonzalez, M.B., Ch.B., D.P.H.

*Mrs. U. E. Williams, M.D.

*Mrs. B. Barrington-Ward, M.B., B.Ch.

*J. McMichael, M.B., B.Ch.

*Miss A. J. Rae, M.R.C.S., L.R.C.P., D.P.H.

*Mrs. A. P. Scott, M.B., Ch.B.

Chief Dental Surgeon and Principal School Dental Officer:

S. H. Pollard, L.D.S.

Dental Surgeons:

E. Ferguson, M.B.E., L.D.S.

*W. L. Norman, L.R.A.M., L.D.S., R.C.S.

Director of Nursing Services:

Miss V. M. Hird, S.R.N., S.C.M., Q.N., H.V.Cert.

Area Nursing Officers:

Miss A. M. Delahunty, S.R.N., S.C.M., Q.N.

Miss M. Ward, S.R.N., S.C.M., H.V.Cert.

Health Education Officer:

Miss V. Blanchard

Assistant Health Education Officer:

M. R. Holroyd

Senior Speech Therapist:

Miss B. M. Elton, L.C.S.T.

Speech Therapists:

*Mrs. J. J. B. Easdown, L.C.S.T.

*Mrs. J. M. Rigby, L.C.S.T.

*Mrs. R. A. Stamp, L.C.S.T.

Physiotherapist:

*Mrs. G. J. Cooke, M.C.S.P.

Chiropodists:

S. Marper, M.Ch.S.

R. E. Shazell, M.Ch.S.

Mrs. C. Davies, M.Ch.S.

*Miss O. M. Phillips, M.Ch.S.

Food & Drugs Act.

Chief Inspector:

D. Thompson

Ambulance Superintendent:

J. F. Petch

Administrative Assistants:

Mrs. A. E. C. Cross

Miss D. C. Day, S.R.N.

P. W. Cooper

**Part-time.*

MEDICAL OFFICERS OF HEALTH OF DISTRICT COUNCILS

Bury St. Edmunds Borough Council	}	Vacancy
Thingoe Rural District Council		
Sudbury Municipal Borough	}	* E. Kinnear, M.B., Ch.B., M.F.C.M. D.P.H.
Hadleigh Urban District Council		
Cosford Rural District Council		
Melford Rural District Council		
Thedwastre Rural District Council		
Newmarket Urban District Council	}	Vacancy
Haverhill Urban District Council		
Clare Rural District Council		
Mildenhall Rural District Council		

*Part-time.

CATEGORIES AND NUMBERS EMPLOYED
IN POST 30th SEPTEMBER

CATEGORY OF STAFF	Establish- ment 30.9.72	Whole time	Part- time	Whole- time equivalent of Col. 4	Total whole-time equivalent	
					1972	1971
1	2	3	4	5	6	7
Administrative and Clerical Staff						
Health Department ..	16	16	—	—	16.0	16.0
Health Clinics	5	4	1	0.5	4.5	4.0
Ambulance Operational Staff ..	38	37	—	—	37	29
Chiropodists	5	3	1	0.5	3.5	3.5
Chiropody Attendants	5	2	—	—	2.0	2.0
Dentists	5	2	1	0.3	2.3	2.3
Dental Surgery Assistant ..	5	2	1	0.4	2.4	2.4
Doctors	6	3	6	1.0	4.0	4.0
Health Educator and Assistant ..	2	2	—	—	2	1
Manual and Domestic Cleaners at Health Clinics	8	1	7	3.2	4.2	3.7
Nursing and Auxiliary						
Administrative and Super- visory Nursing Staff	7	7	—	—	7	3
Health Visitors/School Nurses	28	22	1	0.5	22.5	27
Combined Nursing (District/ Midwives)	61	36	1	1.0	37.0	42
Home Nurses S.R.N.) S.E.N.)		20	2	1.0	21.0	17.7
Nursing Auxiliaries ..	4	2	6	3.5	5.5	4.0
Physiotherapist	1	—	1	0.3	0.3	—
Speech Therapists	3	1	3	2.0	3.0	2.5

APPENDIX C

LIST OF COUNTY OWNED BUILDINGS

		<i>Date first occupied</i>
<i>Ambulance Stations.</i>		
Hospital Road, Bury St. Edmunds		April 1961
Camps Road, Haverhill		January 1964
Chestnut Close, Mildenhall		August 1972
Exeter Road, Newmarket		February 1961
Acton Lane, Sudbury		September 1966
V.H.F. Station, Back Street, Ousden		September 1955
<i>Health Clinics</i>		
Blomfield House, Looms Lane, Bury St. Eds.		May 1967
Camps Road, Haverhill		January 1964
Chestnut Close, Mildenhall		September 1972
Exeter Road, Newmarket		February 1961
Acton Lane, Sudbury		March 1967
<i>Houses</i>	<i>Occupied by</i>	
*District Nurses House, Newmans Green, Acton.	District Nurse	December 1970
*District Nurses House, Cox Hill, Boxford.	District Nurse	September 1962
99, Cannon Street, Bury St. Edmunds.	Caretaker	April 1967
*59, Hospital Road, Bury St. Edmunds.	District Nurse	February 1953
175, Oliver Road, Bury St. Edmunds.	District Nurse	April 1969
1, 3, 5 & 7, South Close, Bury St. Edmunds	Ambulancemen	April 1962
*District Nurses House, Upper Green, Felsham	District Nurse	May 1971

<i>Houses.</i>	<i>Occupied by</i>	<i>Date first occupied</i>
*District Nurses House, 1, Chestnut Road, Glemsford.	District Nurse	April 1969
*1, Taylor Road, Hadleigh.	District Nurse	October 1964
*12, Harewood Terrace, Haverhill.	Ambulanceman	May 1967
*9, West Street, Icklingham.	District Nurse	February 1965
*District Nurses House, Honington Road, Ixworth.	District Nurse	May 1953
*20, Dash End, Kedington.	District Nurse	August 1965
*7, Eriswell Drive, Lakenheath.	District Nurse	October 1967
*District Nurses House, Pound Green, Lt. Thurlow.	District Nurse	September 1969
*3 & 4 Chestnut Close, Mildenhall.	Ambulancemen	August 1972
*46, Kingsway, Mildenhall.	District Nurse	March 1955
Flats 1 & 2, Ambulance Station. Exeter Road, Newmarket.	Ambulancemen	February 1961
*2, St. Fabians Close, Newmarket.	District Nurse	April 1969
*District Nurses House, Heath Road, Norton.	Area Nursing Officer	April 1961
*District Nurses House, Bury Road, Stanton.	District Nurse	February 1968
Flats 1 & 2, Ambulance Station, Acton Lane, Sudbury.	Ambulancemen	September 1966
*14, Hitchcock Place, Sudbury.	District Nurse	November 1963
*District Nurses House, Flatts Lane, Tostock.	District Nurse	November 1971

*garage included.

APPENDIX D

COURSES ATTENDED BY MEMBERS OF THE HEALTH DEPARTMENT STAFF

COURSE	Duration	ORGANIZING BODY/ LOCATION	STAFF ATTENDING
<u>January</u>			
Induction Course ..	4 days	West Suffolk County Council	2 Clerical Assistants
Training in NHS Re-organisation.	8 days	College of Hospital Management, London.	Director of Nursing Services
<u>February</u>			
Ambulance Service Conference.	3 days	Wrenbury Hall, Cheshire County Council.	Ambulance Superintendent.
Ambulance Instructors	10 days	.. .. .	1 Ambulance Station Supervisor.
Conference on Contraception and Abortion.	1 day	Royal Society of Health, Westminster.	County Medical Officer of Health.
Conference of Assessing Geriatric Needs.	1 day	King Edward's Hospital Fund.	1 Health Visitor
Study day on "The Diabetic within the Community".	1 day	Queen's Institute of District Nursing.	2 Health Visitors
Middle Management Multi-Disciplinary Course.	16 days	William Rathbone Staff College, Liverpool.	1 Area Nursing Officer
<u>March</u>			
Symposium "The Unity Medicine".	2 days	Royal College of Physicians, London.	County Medical Officer of Health.
<u>April</u>			
Health Congress	5 days	Royal Society of Health Eastbourne.	County Medical Officer of Health.
Symposium "Communications, Today & Tomorrow".	1 day	Pye Telecommunications, London.	Ambulance Superintendent.
Play-group Workers conference.	1 day	Social Services Department.	1 Area Nursing Officer
Seminar on Industrial Relations Act.	½ day	West Suffolk County Council.	Senior Administrative Officer, Director of Nursing Services, and 1 Administrative Assistant.
<u>May</u>			
Study day on Venereal Disease.	1 day	Society of Social Workers, Middlesex Hospital.	1 Health Visitor
Teaching in Preparation for Parenthood.	5 days	Alston Hall, Longridge.	2 Midwives

COURSE	Duration	ORGANIZING BODY/ LOCATION	STAFF ATTENDING
<u>May (contd.)</u>			
Congress "Community Foot Health in the 1970's".	2 days	Chiropodists Association, London.	1 Senior Chiropodist
Course for Medical Officer's on "Mentally Subnormal Children".	26 days	National Association of Mental Health	Senior Medical Officer
Ambulance Training Course.	10 days	Danbury Park, Chelmsford.	2 Ambulancemen
Conference on Patients' Clothing.	1 day	King Edward's Hospital Fund.	1 Area Nursing Officer
Conference on "The Community Hospital".	1 day	.. ..	Deputy County Medical Officer of Health.
<u>June</u>			
Ambulance Training Course.	10 days	Danbury Park, Chelmsford.	3 Ambulancemen
<u>Jan.-June.</u>			
Health Visitors Course for Students.	6 months	Ipswich Civic College	2 Student Health Visitors.
<u>July</u>			
Conference "The Hunter Report".	1 day	Royal Society of Health	County Medical Officer of Health.
Refresher Course for Midwives.	7 days	Cheltenham	2 Midwives
"Health in Education" short course for teachers.	5 days	College of Education, Newcastle.	Health Education Officer
<u>August</u>			
Refresher course for Midwives.	7 days	Roehampton	2 Midwives
<u>September</u>			
Nursing Conference on Reorganization.	1 day	Royal College of Westminster.	Director of Nursing Services.
"The Dentist, his team and the Community".	4 days	St. Anne's College, Oxford.	Chief Dental Officer
P.W.I. Course	12 days	Queen's Institute of District Nursing, London	4 District Nurses
Communications in Education -- Study Day.	1 day	Ipswich	Health Education Officer, Assistant Health Education Officer, 6 Health Visitors.
<u>Sept.-Dec.</u>			
ONC in Public Administration.	1 day a week	West Suffolk College of Further Education	1 Clerical Assistant
<u>October</u>			
First Line Management Course	12 days	London	2 Nursing Officers

COURSE	Duration	ORGANIZING BODY/ LOCATION	STAFF ATTENDING
<u>October (contd.)</u>			
Chiropody Symposium.	1 day	Shrewsbury	2 Senior Chiropodists
Diagnosis and Treatment of the Deaf Child.	3 days	Nuffield Institute of Laryngology & Otology, Grays Inn Road, London.	School Medical Officer
Ambulance Training Course.	10 days	Danbury Park, Chelmsford.	1 Ambulanceman
<u>November</u>			
Sexually Transmitted Disease.	1 day	"Wellcome Institute", Society of Medical Officer's of Health, London.	School Medical Officer
Refresher Course for Midwives.	7 days	Hastings	1 Midwife
<u>November-December</u>			
Ambulance Training Course.	30 days	Danbury Park, Chelmsford.	1 Ambulanceman

